

## **SECTION 5- Definitions and Classifications of Healthcare Associated Infections (HAI)**

### **I. GENERAL.**

A. The criteria used to identify HAI are reviewed and approved by the Surgical PI Committee. Criteria approved for use at DHCN are the definitions developed by the Hospital Infections Program, Centers for Disease Control and Prevention

### **II. SPECIFIC**

A. Criteria used to define nosocomial infections at all sites except surgical site infections are located on the S drive in the Infection Control Policies folder under CDC Guidelines. The CDC is in the process of redefinition of all nosocomial infections, but this remains the current standard available.

1. Nosocomial infections are clinically active infections occurring in hospitalized patients in whom the infection was not present or documented as incubating at the time of admission.

2. Infections are considered HAI if they occur 48 hours or more after admission.

3. Infections identified in patients after discharge will be considered HAI if they occur within two weeks of discharge except in those cases which have a prolonged incubation period that may not be apparent for weeks or months.

4. Infections occurring in outpatients will be considered nosocomial if they occur at the site of a procedure performed in the clinic or hospital OR if an infection occurs following a documented exposure to an infectious disease at DHCN, and there is no record of exposure to the agents outside of the hospital/clinic within the incubation period of the disease.

B. Criteria used to define surgical site infections are found on the S Drive under the folder Infection Control Policies/CDC Guidelines. The "Guideline for Prevention of Surgical Site Infection, 1999" presents the Centers for Disease Control and Prevention (CDC)'s recommendations for the prevention of surgical site infections (SSIs), formerly called surgical wound infections. This two-part guideline updates and replaces previous guidelines.

1. Surgical site infections are considered HAI if they occur within 30 days of discharge or up to one year if implantable devices or prostheses were placed.

2. Surgical site infection (SSI) is classified according to their depth and severity as: superficial, deep, or organ-space SSI.

3. When reporting SSI, the following information is gathered to determine the surgical risk index: the ASA score; wound classification (Class I-IV); and actual cut-time. The surgical risk index is calculated to evaluate the expected rate of infection for the particular individual by procedure. This information is vital to evaluating nosocomial surgical infections occurring in the facility as compared to nationally reported SSI data.

**REFERENCES:**

1. Garner JS, Jarvis WR, Emori TG, Horan TC, Hughes JM. CDC definitions for nosocomial infections. In: Olmsted RN, ed.: APIC Infection Control and Applied Epidemiology: Principles and Practice. St. Louis: Mosby; 1996: pp. A-1--A-20.
2. Mangram, Alicia et al. Guidelines for Prevention of Surgical Site Infection, 1999. AJIC: American Journal of Infection Control 1999; 27:97-134.